## State of Nevada Division of Water Resources Request to be Removed from Mailing List

In reg	ards to permit number(s)	: (Check applicable item.)
[]	Please delete my name from th (Fill in <u>ADDRESS</u> information	e mailing list and cease sending copies of all correspondence to the address below: and sign below)
Please delete my name, as well as my Agent's name from the mailing list, correspondence to the address below (Agent's address not necessary): (Fill in <u>ADDRESS</u> information and sign below)		• •
I am	the:	
[]	Individual named below. (C	omplete the signature, name, and address below.)
[]	Agent or representative. (C	omplete the signature, name, and address below.)
This i	form acknowledges that I wish	to be removed from the mailing list for the above referenced permit(s).
Pleas	e mail completed form to Neva	ada Division of Water Resources, or fax to (775) 687-6972.
		SIGNATURE:
		NAME:
		ADDRESS:
		CITY, STATE, ZIP:
		AGENT'S NAME: